

HOPWA Facility Based Non-Housing

02/27/03	15:18	SETUP ACTIVITY	C04MA08
GRANTEE ACTIVITY NBR:		HUD ACTIVITY NBR:	000000000522
ACTIVITY NAME:	9H0019-A WHITMAN WALKER CLINIC		
TOTAL ESTIMATED AMOUNT:	\$66,453.00		
INDICATE PROGRAM(S) TO BE ADDRESSED			
ENTER (X) TO SELECT PROGRAM, (D) TO DELETE EXISTING PROGRAM PATH			
	-	CDBG	
	-	ESG	
	-	HOME	
	x	HOPWA	
F3 = VALDT F4 = MAIN MENU F5 = PROJ INFO F7 = PREU F8 = NEXT			
F9 = SAVE F10 = MA09 F13 = DELETE			

02/27/03		HOPWA ACTIVITY	C04MP01
15:19			
PROJECT NUMBER:	31	PROGRAM YEAR:	1998
PROJECT TITLE:	HOPWA		ACTIVITY NBR: 000000000522
ACTIVITY NAME:	9H0019-A WHITMAN WALKER CLINIC		
PLEASE SELECT ONE:			
	-	FACILITY-BASED HOUSING	
	x	FACILITY-BASED NON-HOUSING	
	-	SCATTERED-SITE HOUSING	
	-	HOUSING INFORMATION/RESOURCE ID/ADMINISTRATION	
	-	SUPPORTIVE SERVICES	
F4 = MAIN MENU F5 = PROJ INFO F7 = PREU F8 = NEXT F10 = MA09			

08/02/02 10:27

FACILITY-BASED NON-HOUSING

C04MP14

PROJECT NUMBER: 31 PROGRAM YEAR: 1998 ACTIVITY NBR: 000000000522
PROJECT TITLE: HOPWA
ACTIVITY NAME: 9H0019-A WHITMAN WALKER CLINIC

DATE OF CLOSING/LEASE EXECUTION: __ / __ / ____

DATE CONSTRUCTION/REHAB STARTED: __ / __ / ____
COMPLETED: __ / __ / ____

DATE OPERATIONS STAFF HIRED : __ / __ / ____

DATE SUPPORT SERVICES STARTED : __ / __ / ____

F3 = VALDT F4 = MAIN MENU F5 = PROJ INFO F7 = PREV F8 = NEXT
F9 = SAVE

08/02/02 10:28

FACILITY-BASED NON-HOUSING

C04MP10

PROJECT NUMBER: 31 PROGRAM YEAR: 1998 ACTIVITY NBR: 000000000522
PROJECT TITLE: HOPWA
ACTIVITY NAME: 9H0019-A WHITMAN WALKER CLINIC

AVAILABLE HOPWA FUNDS

FUNDED FROM HOPWA FUNDS :	\$66,453.00
FUNDED FROM PROGRAM INCOME :	\$0.00
HOPWA AMOUNT FUNDED FOR ACTIVITY :	<u>\$66,453.00</u>
TOTAL HOPWA EXPENDITURES :	\$66,453.00
ACTIVITY BALANCE :	<u>\$0.00</u>

F3 = VALDT F4 = MAIN MENU F5 = PROJ INFO F7 = PREV F8 = NEXT
F9 = SAVE

08/02/02 10:29

FACILITY-BASED NON-HOUSING

C04MP15

PROJECT NUMBER: 31 PROGRAM YEAR: 1998 ACTIVITY NBR: 000000000522

PROJECT TITLE: HOPWA

ACTIVITY NAME: 9H0019-A WHITMAN WALKER CLINIC

SITE EXPENDITURES

ACQUISITION: _____
REHAB/CONVERSION/REPAIR: _____
LEASE: _____
OPERATING COSTS: _____
OTHER: _____

\$0

IS THE SITE OWNED BY A PUBLIC ENTITY? (Y/N): -

IS THIS ACTIVITY "SUBSTANTIAL" REHAB? (Y/N): -

PLEASE ENTER DATA

F3 = VALDT F4 = MAIN MENU F5 = PROJ INFO F7 = PREV F8 = NEXT

F9 = SAVE